

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000066496

FILED
Aug 24, 2009
Secretary of State

Entity Name: FLORIDIAN EMERGENCY SPECIALISTS, LLC

Current Principal Place of Business:

5665 NEW NORTHSIDE DRIVE
SUITE 320
ATLANTA, GA 30328 US

New Principal Place of Business:

Current Mailing Address:

5665 NEW NORTHSIDE DRIVE
SUITE 320
ATLANTA, GA 30328 US

New Mailing Address:

FEI Number: 27-0781655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOLISTER, MICHAEL J MD
1112 KELTON BLVD
PENSACOLA, FL 32563 US

Name and Address of New Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JENNIFER F. AULTMAN

08/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: APOLLOMD BUSINESS SERVICES, LLC
Address: 5665 NEW NORTHSIDE DRIVE STE 320
City-St-Zip: ATLANTA, GA 30328 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOAN CATALANO

CORP

08/24/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date